

CEMETERY AND FUNERAL BUREAU

P. O. Box 989003 WEST SACRAMENTO, CA 95798-9003 (916) 574-7870 FAX (916) 574-8620



APPLICATION FOR CHANGE IN LOCATION OF FUNERAL ESTABLISHMENT AND/OR REQUEST APPROVAL TO SHARE PREPARATON AND/OR STORAGE ROOM APPLICATION FEE \$250.00

Change of Location of Funeral Establishment							Request Approval to Change/Share Location of Preparation							
(Complete Sections A, C, E, F and if applicable B and D) and/or Storage Room (Complete Sections A, B, D, E and F) SECTION A: APPLICANT INFORMATION														
Name of Funeral Establishment License Number Expiration Date														
Traine of Functur Establishment										FD Execuse Number			Expiration Date	
Present Establishment Address							City			State		Zip	Code	
										CA				
Please indicate	Please indicate below if Present Preparation and/or Storage Address is different than above:													
Different Preparation and/or Storage Address							City			Zip Code			License Number	
												FD		
Telephone Number Fax Number						Email Addres				SS (Not required)				
()			()										
SECTION B: DESIGNATED MAIN OFFICE (To be completed only if requesting approval to share preparation and/or storage)														
Name of Establishment							License Number			Miles from FD listed in Section				
						FD								
Address						ty				State	e	7	Zip Code	
										CA				
SECTION C	: NEW I	ESTABLIS	SHME	NT LOCATI	ON	(To be com	plete	ed only if funeral o	establishment	t is mo	ving to a	nothe	r location.)	
New Establishment Address						City						Zip Code		
Preparation and	d Storage	on Site		☐ Yes] N	No						
SECTION D			N OF	PREPARAT	ION	AND/O	R	STORAGE						
			ent is cha	anging it's preparat	ion an	d/or storage						-		
Name of Establishment (If applicable)						Miles from Main O			in Office (1	Iffice (If applicable)			License Number FD	
Address						City					Zip Code			
Use of Facility Preparation	and/or	Storage	If	f requesting app				e the establish ctual Agreeme					nership?	
			NIED A			iiiit a coii	mac	tuai Agreeine	iii wiiii iiii	s app	ncation			
SECTION E: MANAGING FUNERAL DIRECTOR Last Name First License Number														
Last Ivanic						That					FDR			
SECTION F: a corporation, or th					e sign	ed by the o	wnei	r, if a sole proprie	torship; a par	tner, if	a partne	ership	; or a corporate officer, if	
•		f perjury und	der the l	laws of the Stat	e of (California	tha	at all statemen	ts furnishe	d in c	connec	tion	with this application	
are true and acc	curate.				-							-		
Signature						Print Name							Date	
FOR BUREAU USE ONLY														
Date Cashiered Amount Received							A	ATS ID Number			Receipt Number			
Common Ownership Checked	Within 60 Miles	Inspection No Sent	otice	Application Approved		Status Screen		Notes Screen	New Estab License Or (If applicab	dered	nt	License Mailed		



CEMETERY AND FUNERAL BUREAU

1625 NORTH MARKET BLVD., SUITE S-208 SACRAMENTO, CA 95834 (916) 574-7870 Fax (916) 574-8620



INFORMATION AND INSTRUCTIONS FOR APPLICATION FOR: CHANGE IN LOCATION AND REQUEST FOR APPROVAL TO SHARE PREPARATION AND/OR STORAGE

To be completed when a funeral establishments changes location of it main office and/or preparation and/or storage.

INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR CHANGE IN LOCATION

- **Section A:** Applicant Information (to be completed by all applicants)
- Section B: Designated Main Office (to be completed only if requesting approval to share preparation and/or storage)
- Section C: New location of Establishment (to be completed only if your establishment is moving)
- **Section D:** New location of Preparation and/or Storage (to be completed only if you are changing location of your preparation and/or Storage)
- **Section E:** Ownership (to be completed by all applicants)
- Section F: Name and FDR number of Managing Funeral Director (to be completed by all applicants)
- **Section G:** Applicant Certification (to be completed by all applicants)

CONDITIONS THAT MUST BE MEET FOR APPROVAL TO SHARE PREPARATION AND STORAGE

A licensed funeral establishment may share a preparation and/or a storage room with other licensed funeral establishments, upon approval by the Board, under the following conditions, per California Code of Regulations Section 1223.1:

- (a) The licensed funeral establishments are under common ownership or have a contractual agreement to share a preparation and/or storage room;
- (b) The common owners have designated one funeral establishment as the main office as defined in Section 1204(c)(2);
- (c) The remaining establishments or the establishments using the facilities of the main office are within a 60 mile radius of the main office:
- (d) The licensed funeral establishment in which the common storage room is located has designated a separate labeled area within the storage room for each of the establishments using its facilities and has sufficient capacity to accommodate each licensee using the space;
- (e) An identification and labeling system shall be in place to effectively identify the human remains being prepared and/or stored in the facilities;
- (f) The facilities meet the requirements as specified in Section 7616 of the Business and Professions Code and have passed inspection by the Board to determine its suitability for shared purposes;
- (g) A licensed funeral establishment requesting permission from the Board to share their preparation and/or storage room must make a request, in writing, on a form provided by the Board. An inspection will then be scheduled and completed to ensure that the above mentioned conditions have been met before the establishment can begin sharing its facilities.

**** When preparation and storage will be at two separate locations, two applications need to be filed.****